

AMENDED IN SENATE JUNE 3, 2003
AMENDED IN SENATE MARCH 10, 2003

SENATE BILL

No. 24

Introduced by Senator Figueroa

December 2, 2002

An act to add Section 124034 to the Health and Safety Code, and to add Sections ~~14011.75, 14148.03, and 14148.04~~ *14148.03, 14148.04, and 14148.05* to the Welfare and Institutions Code, relating to health care.

LEGISLATIVE COUNSEL'S DIGEST

SB 24, as amended, Figueroa. Health care: accelerated enrollment.

(1) Existing law provides for the Medi-Cal program, *administered by the State Department of Health Services*, under which medical benefits are provided to public assistance recipients and certain other low-income persons.

Existing law provides for the Child Health and Disability Prevention (CHDP) program, administered by the department, under which the governing body of each county is required to establish a community child health and disability prevention program for the purpose of providing early and periodic assessments of the health status of children in the county. Existing law, commencing July 1, 2003, requires that all applications for services under the CHDP program be filed electronically, as prescribed.

Existing law establishes the Healthy Families Program, administered by the Managed Risk Medical Insurance Board, to arrange for the provision of health care services to eligible children meeting certain household income requirements.

Existing law requires the department to develop an electronic application to serve as the application for preenrollment into the Medi-Cal program or the Healthy Families Program and to also serve as an application for the CHDP program, to the extent allowed under federal law.

This bill would ~~require~~ *create the CHDP “Deemed Eligible” Infants Gateway under which* the CHDP program *would be required* to confirm the eligibility of, and issue a Medi-Cal card to, any child under the age of one year who is deemed to have applied and is deemed eligible for Medi-Cal pursuant to federal law and on whose behalf Medi-Cal coverage is sought through the CHDP program. By imposing new duties on counties, this bill would create a state-mandated local program.

~~(2) The Medi-Cal program is funded by federal and state funds, and administered by the State Department of Health Services. Federal financial participation, through the federal medicaid program, is contingent upon approval of the state plan for the provision of health services through the Medi-Cal program. Federal law authorizes a state to amend its medicaid plan.~~

~~Existing law requires the department to exercise a federal option to implement, to the extent federal financial participation is available, a program for accelerated enrollment of children, under which a single point of entry, as defined, is designated as the qualified entity for determining eligibility and is required to accept and screen applications for Medi-Cal program benefits for the purpose of forwarding them to the appropriate counties. Each county is responsible for Medi-Cal eligibility determinations.~~

~~This bill would require, on or before July 1, 2004, the department to adopt a process for granting accelerated enrollment for any child under the age of 19 years who applies for Medi-Cal at the county and who would otherwise be eligible for accelerated enrollment for purposes of an application submitted to a single point of entry pursuant to the above accelerated enrollment procedures or eligible for preenrollment into the Medi-Cal program through the CHDP program.~~

~~Because this bill would increase the responsibilities of counties in the administration of the Medi-Cal program by modifying the Medi-Cal eligibility determination process, it would impose a state-mandated local program.~~



~~(3) Existing law requires the department to adopt a federal medicaid option to extend eligibility for Medi-Cal benefits to certain pregnant women.~~

Existing law establishes the Access for Infants and Mothers (AIM) program, administered by the Managed Risk Medical Insurance Board, to provide health insurance coverage for certain eligible persons who pay a subscriber contribution.

This bill would require, on or before July 1, 2004, that the form used to implement the above-described medicaid option also qualify as a simplified application for the Medi-Cal program for those pregnant women or, if necessary to ensure federal financial participation, that the form be modified to add only those elements required for federal financial participation. The bill would require, for purposes of this provision, the department to determine whether to grant eligibility for temporary benefits under the medicaid option, the county to make the final eligibility determination for the Medi-Cal program, the department to develop and adopt a process for transferring the application to the county, and, *based on the department's instructions*, the county to determine if followup is necessary to determine the woman's final eligibility for the Medi-Cal program or to refer the woman to the AIM program.

The bill would require, on or before July 1, 2004, the department to adopt an electronic enrollment process, that would be known as the Prenatal Gateway, for pregnant women to use when applying for Medi-Cal from a provider's office, *if sufficient funding is obtained, as specified*.

By modifying the Medi-Cal eligibility determination process, this bill would increase the responsibilities of counties in the administration of the Medi-Cal program, thereby imposing a state-mandated local program.

The bill would require the department, ~~on or before July 1, 2004~~, to adopt an electronic process, to be known as the Newborn Hospital Gateway, for families to enroll a newborn and any other eligible children in the newborn's family in the Medi-Cal program or the Healthy Families Program from hospitals that have elected to participate in the process.

~~The bill would require the department to report to the Legislature on or before July 1, 2004, on the feasibility of seeking a federal waiver for a 3-year continuous eligibility for children who are eligible under state~~

~~law for the Medi-Cal program or the Healthy Families Program and who are under 3 years of age.~~

~~(4) process, if sufficient funding is obtained, as specified.~~

(3) This bill would establish the Gateway Fund in the State Treasury, to be composed of 3 accounts, as prescribed, the moneys in which may be expended, upon appropriation by the Legislature, for purposes of the bill.

(4) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement, including the creation of a State Mandates Claims Fund to pay the costs of mandates that do not exceed \$1,000,000 statewide and other procedures for claims whose statewide costs exceed \$1,000,000.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to these statutory provisions.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. The Legislature finds and declares all of the
2 following:

3 (a) Recent studies show that the highest infant mortality rates
4 in California are in the Central Valley, that African-American
5 infants have disproportionately higher mortality rates than the rest
6 of the population, and that eligible Hispanic women enroll in the
7 Medi-Cal program and begin prenatal care late in pregnancy
8 posing risks to both the mother and the newborn.

9 (b) Simplifying the enrollment procedures into the Medi-Cal
10 program for pregnant women and children is necessary to promote
11 access to timely health services that can save lives and prevent
12 disabilities.

13 (c) Providing prenatal care and health services in the first years
14 of life can prevent more costly long-term chronic illnesses and
15 disabilities.

16 (d) It is in the state's best interests to realize the savings that will
17 result from enrolling more of the currently eligible pregnant

1 women, newborns, and children into health programs and to
2 maximize receipt of federal matching funds to support these
3 programs instead of continuing to return to the federal government
4 millions of unspent funds.

5 SEC. 2. Section 124034 is added to the Health and Safety
6 Code, to read:

7 124034. (a) Notwithstanding any other provision of law,
8 including the preenrollment procedures applicable to children
9 specified in Section 14011.7 of the Welfare and Institutions Code
10 for the Child Health and Disability Prevention (CHDP) program,
11 the department shall confirm the eligibility of, and issue a
12 Medi-Cal card to, any child under the age of one year who is
13 deemed to have applied and is deemed eligible for Medi-Cal
14 benefits pursuant to Section 1396a(e)(4) of Title 42 of the United
15 States Code and on whose behalf Medi-Cal coverage is sought
16 through the CHDP program. The Medi-Cal card issued pursuant
17 to this section shall be valid until the child's first birthday.

18 (b) Notwithstanding any other provision of law, if Medi-Cal
19 coverage is sought pursuant to this section, the department shall
20 not require, on behalf of the child and as a condition of eligibility,
21 that an application be submitted or that any other referrals of the
22 child be made, to the department, a single point of entry, or the
23 county.

24 ~~SEC. 3. Section 14011.75 is added to the Welfare and~~
25 ~~Institutions Code, to read:~~

26 ~~14011.75. (a) On or before July 1, 2004, the department shall~~
27 ~~adopt a process for granting accelerated enrollment for any child~~
28 ~~under the age of 19 years who applies for Medi-Cal benefits at the~~
29 ~~county and who would otherwise be eligible for accelerated~~
30 ~~enrollment into the Medi-Cal program pursuant to Section~~
31 ~~14011.6 or for preenrollment into the Medi-Cal program through~~
32 ~~the Child Health and Disability Prevention (CHDP) program~~
33 ~~pursuant to Section 14011.7.~~

34 ~~(b) In developing the accelerated enrollment process required~~
35 ~~by subdivision (a), the department shall consult with an advisory~~
36 ~~committee, that shall consist of consumer, provider, county, and~~
37 ~~health plan representatives.~~

38 ~~SEC. 4.—~~

39 ~~(c) The requirements of this section shall be known as the~~
40 ~~CHDP "Deemed Eligible" Infants Gateway.~~

1 SEC. 3. Section 14148.03 is added to the Welfare and
2 Institutions Code, to read:

3 14148.03. (a) On or before July 1, 2004, pursuant to options
4 provided in federal law and notwithstanding any other provision
5 of law, the form used by a provider to collect information about a
6 pregnant woman pursuant to the Medi-Cal temporary benefits
7 program under Section 14148.7 as that program is implemented on
8 January 1, 2003, shall itself qualify as a simplified application for
9 the Medi-Cal program for pregnant women, or, if necessary to
10 ensure federal financial participation, the form shall be modified
11 to add only those elements required for federal financial
12 participation *and be as simple as the department considers*
13 *practicable*.

14 (b) For purposes of this section, the department shall determine
15 whether to grant eligibility for temporary benefits under Section
16 14148.7 and the county shall make the final eligibility
17 determination for the Medi-Cal program. The department shall
18 develop and adopt a process for transferring the application to the
19 ~~county~~. *The county and a followup process that is as simple as the*
20 *department considers practicable to be used by the county if follow*
21 *up is necessary. Based on the department's instructions, the county*
22 *shall make a determination whether followup is necessary to*
23 *determine the woman's final eligibility for the Medi-Cal program*
24 *or to refer the woman to the Access for Infants and Mothers (AIM)*
25 *program. If additional information is required, the applicant shall*
26 *be given at least 60 days from the date of a request for additional*
27 *information to respond to that request.*

28 (c) On or before July 1, 2004, the department shall adopt an
29 electronic enrollment process for pregnant women to use when
30 applying for the Medi-Cal program from a provider's office. The
31 application form for this electronic enrollment shall use the
32 elements of the application form described in subdivision (a) and
33 the procedures specified in subdivision (b). This electronic
34 enrollment process shall be known as the Prenatal Gateway. In
35 developing the Prenatal Gateway required by this subdivision, the
36 department shall consult with an advisory committee of consumer,
37 provider, county, and health plan representatives.

38 (d) The purpose of this section is to begin eligibility and
39 benefits at the time of an eligible pregnant woman's visit to a
40 provider and to continue eligibility and benefits until a final

eligibility determination is made without the submission of any other application form to the department, the county, or a single point of entry.

~~SEC. 5.—~~ *entry and to make the followup process as simple as the department considers practicable.*

(e) The Prenatal Gateway may not be adopted until sufficient moneys have been deposited in the Special Funds Account of the Gateway Fund to defray the costs of developing the Prenatal Gateway.

SEC. 4. Section 14148.04 is added to the Welfare and Institutions Code, to read:

14148.04. (a) ~~On or before July 1, 2004, the~~ *The* department shall adopt, as specified in this section, an electronic process for families to enroll a newborn and any other eligible children in the newborn child's family in the Medi-Cal program or the Healthy Families Program from hospitals that have elected to participate in the process. The electronic enrollment process adopted pursuant to this section shall be known as the Newborn Hospital Gateway.

(b) With respect to the enrollment of a child under the age of one year who is deemed to have applied and is deemed eligible for Medi-Cal benefits under Section 1396a(e)(4) of Title 42 of the United States Code, *on or before July 1, 2004*, the enrollment procedures of the Newborn Hospital Gateway shall comply with the requirements of Section 124034 of the Health and Safety Code and specifically include procedures for confirming the eligibility of, and issuing a Medi-Cal card to, that child.

~~(c) With respect to the enrollment of any newborn who is not deemed eligible for Medi-Cal under Section 1396a(e)(4) of Title 42 of the United States Code and any other eligible children in the newborn child's family, the Newborn Hospital Gateway shall include an application and procedures under which, with only one form, the child or children, in the discretion of the participating hospital, may apply through the electronic enrollment process and be granted accelerated enrollment that would continue until the final eligibility determination is made. The purpose of this subdivision is to begin temporary eligibility and benefits for children before the mother is discharged from the hospital and to continue eligibility and benefits until a final determination is made without the submission of any other application form to the department, the county, or a single point of entry.~~

1 ~~(d)–~~

2 (c) In developing the Newborn Hospital Gateway required by
3 this section, the department shall consult with an advisory
4 committee of consumer, provider, county, and health plan
5 representatives.

6 ~~SEC. 6.—The State Department of Health Services shall report~~
7 ~~to the Legislature on or before July 1, 2004, on the feasibility of~~
8 ~~seeking a federal waiver under Section 1115 of the Social Security~~
9 ~~Act (42 U.S.C. Sec. 1315) for a three-year continuous eligibility~~
10 ~~for children who are eligible under state law for the Medi-Cal~~
11 ~~program or the Healthy Families Program and who are under three~~
12 ~~years of age.~~

13 ~~SEC. 7.—~~

14 (d) *The Newborn Hospital Gateway may not be adopted until*
15 *sufficient moneys have been deposited in the Special Funds*
16 *Account of the Gateway Fund to defray the costs of developing the*
17 *Newborn Hospital Gateway.*

18 SEC. 5. Section 14148.05 is added to the Welfare and
19 Institutions Code, to read:

20 14148.05. (a) *There is hereby created in the State Treasury*
21 *the Gateway Fund.*

22 (b) *Moneys in the fund may be expended, upon appropriation*
23 *by the Legislature, for purposes of implementing the CHDP*
24 *“Deemed Eligible” Infants Gateway, as provided for in Section*
25 *124034 of the Health and Safety Code, the Prenatal Gateway, as*
26 *provided for in Section 14148.03, and the Newborn Hospital*
27 *Gateway, as provided for in Section 14148.04, and in accordance*
28 *with subdivision (c).*

29 (c) *The fund shall consist of the following accounts:*

30 (1) *The Federal Funds Account, which shall consist of all*
31 *public funds received by the Controller from nonstate sources, and*
32 *the interest accrued thereon. The funds in this account shall be*
33 *used exclusively for implementation of Section 124034 of the*
34 *Health and Safety Code.*

35 (2) *The State Public Funds Account, which shall consist of all*
36 *public funds received by the Controller from state sources, and the*
37 *interest accrued thereon. This account shall be limited to one*
38 *hundred ninety-six thousand dollars (\$196,000). The funds in this*
39 *account shall be used exclusively for implementation of Section*
40 *124034 of the Health and Safety Code.*

1 (3) *The Special Funds Account, which shall consist of all funds*
2 *received by the Controller from private foundations and other*
3 *nongovernmental sources and interest accrued thereon. Moneys in*
4 *this account shall be used exclusively for the purpose of*
5 *implementing Sections 14148.03 and 14148.04.*

6 SEC. 6. Notwithstanding Section 17610 of the Government
7 Code, if the Commission on State Mandates determines that this
8 act contains costs mandated by the state, reimbursement to local
9 agencies and school districts for those costs shall be made pursuant
10 to Part 7 (commencing with Section 17500) of Division 4 of Title
11 2 of the Government Code. If the statewide cost of the claim for
12 reimbursement does not exceed one million dollars (\$1,000,000),
13 reimbursement shall be made from the State Mandates Claims
14 Fund.

